



**New Hampshire**  
Department of  
Revenue Administration

**2014**  
**ED-06**

FOR DRA USE ONLY

**PRINT OR TYPE**  
**STEP 1**

**COMPLAINT FORM**

**COMPLAINANT INFORMATION**

1.	NAME:
2.	ADDRESS:
	ADDRESS (CONTINUED)::
3.	CITY/STATE/ZIP:

4.	HOME PHONE NUMBER:
5.	WORK PHONE NUMBER:
6.	EMAIL ADDRESS:

**STEP 2**

**PARTY AGAINST WHOM COMPLAINT IS ALLEGED**

7.	NAME:
8.	ADDRESS:
	ADDRESS (CONTINUED)::
9.	CITY/STATE/ZIP:

10.	TELEPHONE NUMBER:
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**STEP 3**

11. CONCISE STATEMENT CONCERNING THE ALLEGED VIOLATION INCLUDING CITATION OF APPLICABLE SECTION OF RSA 77-G AND/OR REV 3200:


12. STATEMENT OF FACTS: Please explain the basis for your complaint. If necessary, attach additional sheets.


13. NAMES AND PHONE NUMBERS OF WITNESSES:


**STEP 4**

Under penalties of perjury, I declare that I have examined this document and to the best of my belief the information herein is true, correct and complete.

COMPLAINANT'S SIGNATURE (IN INK)

DATE

PRINT SIGNATORY NAME & TITLE

MAIL TO: NH DRA  
EDUCATION TAX CREDIT  
PO BOX 488  
CONCORD NH 03302-0488

**ED-06 EDUCATION TAX CREDIT COMPLAINT FORM  
INSTRUCTIONS**

**WHO MUST FILE?**

Anyone who alleges a violation of RSA 77-G and Rev 3200 should file an Education Tax Credit Complaint Form (Form ED-06).

**WHEN TO FILE?**

Form ED-06 should be sent as soon as a violation of RSA 77-G has occurred or is known to have occurred.

**WHERE TO FILE?**

Form ED-06 may be mailed to:

NH DRA  
Education Tax Credit  
PO Box 488  
Concord, NH 03302-0488

Or may be hand-delivered to the Department of Revenue Administration during business hours (8:00 a.m. to 4:30 p.m.) at:

Governor Hugh J. Gallen Office Park South  
109 Pleasant Street  
Medical and Surgical Building  
Concord, NH.

**NEED HELP?**

Call the Education Tax Credit Line at (603) 230-5018. For more information visit us on the web at [www.nh.gov/revenue](http://www.nh.gov/revenue). Hearing or speech impaired individuals may call TDD Access: Relay NH 1-800-735-2964.

**LINE-BY-LINE INSTRUCTIONS**

**STEP 1**

**LINE 1** Enter the complainant's name.

**LINE 2** Enter the complainant's street address.

**LINE 3** Enter the complainant's city, state and zip code.

**LINE 4** Enter the complainant's home telephone number.

**LINE 5** Enter the complainant's work telephone number.

**LINE 6** Enter the complainant's email address.

**LINE-BY-LINE INSTRUCTIONS CONTINUED**

**STEP 2**

**LINE 7** Enter the name of the party against whom the complaint is alleged.

**LINE 8** Enter the street address of the party against whom the complaint is alleged.

**LINE 9** Enter the city, state, and zip code of the party against whom the complaint is alleged.

**LINE 10** Enter the telephone number of the party against whom the complaint is alleged.

**STEP 3**

**LINE 11** Provide a summary statement about the alleged violation including citation of applicable section of RSA 77-G and/or Rev 3200.

**LINE 12** Provide all the details about the alleged violation and why you believe the action or inaction violated RSA 77-G.

**LINE 13** If you know of anyone who also witnessed the alleged violation, provide their names and phone numbers.

**STEP 4**

The complaint must be dated and signed in ink by the complainant. In addition, print the name and title of the complainant signing the application.